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November 20, 2008

TO: SACHI A. HAMAI
Executive Officer
Board of Supervisors

Attention: Agenda Preparation

FROM: JOHN F. KRATTLI
Senior Assistant County Counsel

RE: **Cherylle Cuozzo, et al. v. County of Los Angeles**
Los Angeles Superior Court Case No. PC 032 929

Attached is the Agenda entry for the Los Angeles County Claims Board's recommendation in the above-referenced matter. Also attached are the Case Summary and the Summary Corrective Action Plan.

It is requested that this recommendation, the Case Summary, and the Summary Corrective Action Plan be placed on the Board of Supervisors' agenda for December 2, 2008.

JFK:rfm

Attachments

HOA.553403.1

Board Agenda

MISCELLANEOUS COMMUNICATIONS

Los Angeles County Claims Board's recommendation: Authorize settlement of the matter entitled Cherylle Cuozzo, et al. v. County of Los Angeles, Los Angeles Superior Court Case No. PC 032 929, in the amount of $335,000, and instruct the Auditor-Controller to draw a warrant to implement this settlement from the Department of Health Services' budget.

This medical negligence lawsuit arises from treatment received by a patient while hospitalized at the Olive View Medical Center.

CASE SUMMARY

INFORMATION ON PROPOSED SETTLEMENT OF LITIGATION

CASE NAME	Cherylle Cuozzo, et al v. County of Los Angeles
CASE NUMBER	PC 032929
COURT	Los Angeles Superior Court North Valley District
DATE FILED	June 27, 2003
COUNTY DEPARTMENT	Department of Health Services
PROPOSED SETTLEMENT AMOUNT	$335,000.00
ATTORNEY FOR PLAINTIFF	Steven G. Cohn, Esq.
COUNTY COUNSEL ATTORNEY	Narbeh Bagdasarian
NATURE OF CASE	This is a medical malpractice case brought by Cherylle Cuozzo, Jennifer Cuozzo and Amanda Cuozzo, the surviving family of Ernest Cuozzo, who died on April 2, 2002, at Olive View Medical Center ("OVMC"). On March 31, 2002, Ernest Cuozzo, a 51-year-old male, presented to the Emergency Department at OVMC. The staff evaluated the patient and discovered that he was suffering from an increased number of red blood cells.

Appropriate therapeutic measures were undertaken to lower the patient's red blood cell count.

On the following day, the patient's condition deteriorated as he suffered an arrest. Although the patient was resuscitated, his condition worsened, and he died on April 2, 2002. An autopsy was performed, which identified the cause of death as lung infection with increased red blood cells as a major contributing factor.

Mr. Cuozzo's surviving family brought a lawsuit against the County of Los Angeles, contending that the OVMC failed to provide the patient with the necessary treatments.

Although the County asserts that proper care was provided to Mr. Cuozzo, considering the risks involved in a jury trial, however, the Department of Health Services agreed to propose a settlement of this case in the amount of $335,000.00.

PAID ATTORNEY FEES, TO DATE	$75,639
PAID COSTS, TO DATE	$23,194

Summary Corrective Action Plan

Date of incident/event:	April 2, 2002
Briefly provide a description of the incident/event:	Ernest Cuozzo presented to the Emergency Department at Olive View/UCLA Medial Center on March 31, 2002, with chest congestion, a productive cough, diarrhea and weakness. Laboratory studies were consistent with an overproduction of red blood cells that did not improve with appropriate therapeutic measures. On the following day his condition worsened and he died. Autopsy results revealed he died of a lung infection with increased red blood cells as a major contributing factor.

1. Briefly describe the root cause of the claim/lawsuit:

- Failure to timely diagnose and treat infectious condition/sepsis.

2. Briefly describe recommended corrective actions:
(Include each corrective action, due date, responsible party, and any disciplinary actions if appropriate)

- Appropriate personnel corrective actions were taken.
- 2005: DHS-wide Surviving Sepsis Campaign was developed to improve the diagnosis, survival, and management of patients with sepsis by addressing the challenges associated with it. Sepsis is considered one of the most challenging and difficult conditions to manage, as the course of sepsis varies widely from patient to patient and can develop as a result of a variety of circumstances. The DHS Surviving Sepsis program increased awareness, understanding, and knowledge, changed patterns in care, and defined standards through a care protocol developed with stakeholders at each DHS facility.
- 7/06 through 11/07: System-wide education was provided for Surviving Sepsis Campaign including at this facility.

3. State if the corrective actions are applicable to only your department or other County departments:
(If unsure, please contact the Chief Executive Office Risk Management Branch for assistance)

☐ Potentially has County-wide implications.

☐ Potentially has implications to other departments (i.e., all human services, all safety departments, or one or more other departments).

X Does not appear to have County-wide or other department implications.

Signature: (Risk Management Coordinator)	Date: 11/12/08
Signature: (Interim Chief Medical Officer)	Date: 11/12/08
Signature: (Interim Director)	Date: 11-13-08